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a second conduit having a second lumen, the second lumen in fluid communication with the first lumen, the second conduit having a second axis, the second axis intersecting the first axis but not being coaxial with the first axis;

means for connecting the first conduit to the catheter;

means for connecting the second conduit to the drip assembly; and

means for connecting the connector to a patient's scalp.

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#### REMARKS

The amendments made in response to the Office Action of April 28, 1999 are believed to obviate the objections and rejections of the Office Action. Favorable action is solicited.

The Office Action rejected claims 1-28 as indefinite as a result of deficiencies of claims 1, 12, 16; 11; 19; and 20. The Office Action also rejected claims 1-10 and 12-28 as anticipated by Brightbill. The Office Action rejected claim 11 as obvious over Thompson et al. in view of Brightbill.<sup>1</sup> Objection was made to Figures 1-3 of the drawing.

The amendments above include amendments to claims 1, 12, 16; 11; 19; and 20. These are in response to and are believed to overcome the rejections for indefiniteness. The comment concerning claims 1, 12 and 16 was that an axis was not adequately defined. That axis is now defined. The comment concerning claim 11 was lack of antecedent basis for "the end of the protrusion." Antecedent basis is provided. The comments concerning claim 19 were inadequate definition of an axis and lack of antecedent basis for "said Luer connector." Definition is provided

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<sup>1</sup> The applicant understands the Office to have conducted a full analysis of the claims in accordance with 35 U.S.C. 102 and 103 and all applicable case law. Shorthand is used by the Office and the applicant in relation to such matters, solely for the purposes of ease and economy of communication. The applicant requests that the Office receive applicant's remarks with that understanding, and that anyone hereafter reading the prosecution file history also accept that understanding.

and the term "Luer" is removed. The comment concerning claim 20 was inadequate definition of an axis. Definition is provided.

The amendments above further include amendments obviating the rejection for anticipation. Claims 1-10 and 12-28 are amended by the amendments to claims 1, 12, 16, 19, and 20. Brightbill teaches a catheter convertible from a single lumen catheter into a multilumen catheter. Extensions tubing 46, 48, 50 extends away from a manifold 44. The tubes 46, 48 are at angles to a tube 14. There are anchoring protrusions, not marked for identification. The tubes 46, 48 are angled in the plane containing the protrusions and parallel to the body of the patient. The purpose is to provide a substitute for pulling a large bore catheter from a patient's body and replacing it with a multilumen catheter after surgery. The effort is to avoid profuse bleeding and difficult insertion of the multilumen catheter into the same site as formerly occupied by the large bore catheter. In contrast, the invention of the claims is a luer connector/connector without regard to lumen replacement after surgery, multilumen catheters, bleeding or same-site insertion difficult. The connector includes a female luer connector/connector extending away from the plane containing the anchoring protrusions (claims 1 and dependent claims), not coplanar with the planar surface of the anchoring protrusions (claims 12, 16, 19 and dependent claims), extending away from the patient's body (claim 20 and dependent claims). Nothing in Brightbill discloses this construction.

The amendments also include amendments obviating the rejection of claim 11 for obviousness and any possible further rejection of any claims for obviousness. Brightbill is as described. Thompson discloses a winged infusion holding device. Insofar as understood, the axis of connector 26 is co-axial with the axis of tubing 24 and needle 18. Thompson's purpose is to provide a handle 10 during insertion procedures. Brightbill appears to be an improvement over Thompson in regard to lumen location in a multilumen context. Nothing in Thompson discloses a

luer connector/connector extending away from a plane containing anchoring protrusions, not coplanar with the planar surface of the anchoring protrusions, or extending away from the patient's body. Nothing in Thompson or Brightbill discloses or suggests the constructions as now claimed, or even addresses the problem(s) to which the invention is addressed. Nothing suggests or motivates a combination.

Respectfully Submitted,  
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## APPENDIX

### **Version With Markings To Show Changes Made**

1. (Amended) A luer connector for connecting a catheter to a drip assembly comprising:

a hollow barrel having a barrel lumen, the barrel having a barrel axis that is coaxial with the barrel lumen;

a hollow catheter connection protrusion attached to and extending away from the barrel, the catheter connection protrusion having a protrusion lumen that extends through the catheter connection protrusion, the protrusion lumen being in fluid communication with the barrel lumen, the catheter connection protrusion having a terminal end opposite the barrel;

a pair of anchoring protrusions attached to and extending away from the barrel, the anchoring protrusions being formed essentially in a plane;

a female luer connector attached to the barrel opposite the catheter connection protrusion, the female luer connector having a female luer axis that is not coaxial with the barrel axis, the female luer axis extending away from the plane containing the anchoring protrusions.

11. (Amended) The luer connector of claim 1 further comprising a bulbous end formed on the terminal end of the catheter connection protrusion.

12. (Amended) A luer connector for connecting a catheter to a drip assembly comprising:

a hollow barrel having a barrel lumen, the barrel having a barrel axis that is coaxial with the barrel lumen;

a hollow catheter connection protrusion attached to and extending away from the barrel, the catheter connection protrusion having a protrusion lumen that extends through the catheter connection protrusion, the protrusion lumen being in fluid communication with the barrel lumen;

a pair of anchoring protrusions attached to and extending away from the barrel, the pair of anchoring protrusions producing a substantially planar surface;

a female luer connector attached to the barrel opposite the catheter connection protrusion, the female luer connector having a female luer axis that is not coaxial with the barrel axis or coplanar with the substantially planar surface of the pair of anchoring protrusions, the female luer axis intersecting the barrel axis at an angle of about 30°.

16. (Amended) A luer connector for connecting a catheter to a drip assembly comprising:

a hollow barrel having a barrel lumen, the barrel having a barrel axis that is coaxial with the barrel lumen;

a hollow catheter connection protrusion attached to and extending away from the barrel, the catheter connection protrusion having a protrusion lumen that extends through the catheter connection protrusion, the protrusion lumen being in fluid communication with the barrel lumen;

a pair of anchoring protrusions attached to and extending away from the barrel, the pair of anchoring protrusions producing a substantially planar surface, each of the anchoring protrusions having a suturing hole to allow the anchoring protrusions to be attached to a patient;

a female luer connector attached to the barrel opposite the catheter connection

protrusion, the female luer connector having a female luer axis that is not coaxial with the barrel axis or coplanar with the substantially planar surface of the pair of anchoring protrusions, the female luer axis intersecting the barrel axis at an angle of about 30°.

19. (Amended) A connector for connecting a catheter to a drip assembly comprising:

a hollow barrel having a barrel lumen, the barrel having a barrel axis;

a hollow catheter connection protrusion attached to and extending away from the barrel, the catheter connection protrusion having a protrusion lumen that extends through the catheter connection protrusion, the protrusion lumen being in fluid communication with the barrel lumen;

means for attaching the [luer] connector to a patient's scalp, the means for attaching being formed essentially in a plane;

means for fluidly connecting a drip assembly to the barrel opposite the catheter connection protrusion, the means for fluidly connecting being elongated along [having] an axis that is not coaxial with the barrel axis or coplanar with the plane of the means for attaching.

20. (Amended) A connector for connecting a catheter to a drip assembly for a patient comprising:

a first conduit having a first lumen, the first conduit having a first axis substantially aligned with the first lumen;

a second conduit having a second lumen, the second lumen in fluid communication with the first lumen, the second conduit having a second axis substantially aligned with the second lumen, the second axis intersecting the first axis but not being coaxial with the first axis and extending away from the patient's body;

means for connecting the first conduit to the catheter;

means for connecting the second conduit to the drip assembly; and

means for connecting the connector to a patient's scalp.